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Substitute for form 1449/PTO		Complete if Known			
		Application Number			
INFORM	ATION DISCLOSURE	Filing Date			
		First Named Inventor	MOISES CALDERON		
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(Use as many sheets as necessary)		Examiner Name	Unknown		
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Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
#		MICHAEL S. SWEENEY, MD AND O.H. FRAZIER, MD, "Device-Supported Myocardial Revascularization: Safe Help for Sick Hearts", Ann. Thorac. Surg. 1992; 54: 1065.70.	
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